26CT4938 ASB

Marsy's Law CVI FL Const. Art. 1 § 16(b)

ARREST / NOTICE TO APPEAR

Check if Supplement is Attached
1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias

1

Juvenile

2874

ADMINISTRATIVE

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	32 2026-004077

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
2799 N MILITARY TRL, BOCA RATON, FL 33431	2799 N MILITARY TRL, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/17/2026	19:13	04/17/2026	19:23	04/17/2026	23:30	GUARDIAN TOWING

DEFENDANT

Name (Last, First, Middle): KIZILOVA, SVETLANA ANATOLYEVNA

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	03/15/1983	5'09	130	BLUE	BLONDE	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: S — Religion: NONE

Indication of: Alcohol Influence ☐ Y ☒ N ☐ Unk; Drug Influence ☐ Y ☒ N ☐ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 250 NW 67TH ST 422, BOCA RATON, FL 33487

Mobile Phone:

Residence Type: 1. City 2. County 3. Florida 4. Out of State — 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 250 NW 67TH ST 422, BOCA RATON, FL 33487

Phone: (621) 836-6787

Address Source: SUBJECT

Business Address (Name, Street) (City) (State) (Zip): SELF EMPLOYED,

Phone:

Occupation: Private Chef

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
K241761835950 / CO	[redacted]		MINERALNYE VODY, Russia	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 6. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other:

Name (Last) (First) (Middle)

Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip)

Business Phone

Notified by: (Name) Date Time

Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated

Released To: (Name) Relationship Date Time

The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)

School Attended Grade

Property Crime? ☒ Yes ☐ No

Description of Property: VEHICLE

Value of Property: $10,000

CODE

Drug Activity ☐ No: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperse/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR	1	☐ Y ☒ N	316.193(3C1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
	N	/			

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
		/			

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
		/			

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

FILED PBC - GUN CLUB
26 APR 18 AM 7:11

NOTICE TO APPEAR

Location (Court, Room Number, Address): 200 W Atlantic Ave, Delray Beach, Fl 33444 DELRAY BEACH FL

Court Date and Time: Month May Day 18 Year 2026 Time 8:30 (A.M.) P.M.

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed 4/17/26

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: S. Orozco

Name of Arresting Officer (Print): OROZCO, S. M. I.D. # 927

Transporting Officer: OROZCO I.D. # 927 Agency: BOCA

Name Verification (Printed by Arrestee) (PRINT) Svetlana K

Witness here if subject signed with an "X".

PAGE 1 OF 1

PBSO #0148 REV. 10/22

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P. I. O. ☐ DEFENDANT

0567153

2874

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CONFIDENTIAL VICTIM INFORMATION PER MARSY'S LAW

PROBABLE CAUSE AFFIDAVIT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

ADMIN

OBTS Number			JUVENILE
		1	

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2026-004077

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
KIZILOVA, SVETLANA ANATOLYEVNA		W	F	03/15/1983

CHARGES

Charge Description	Charge Description
316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
CARROLL, LINDA ANN	W	F	[redacted]

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
[redacted]				[redacted]	
[redacted]	(City)	(State)	(Zip)		Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . . .

☐ committed the below acts in my presence.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☐ confessed to _____ admitting to the below facts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 17 day of April 2026 at 17:45 (Specifically include facts constituting cause for arrest.)

On 04/17/2026, at approximately 1745 hours, BRPD communications received a report of a motor vehicle crash in the area of 2799 N Military Trl. I responded to the scene and arrived at approximately 1802 hours. Upon arrival, I observed that the Volkswagen had damage to the front and the Kia had damage to the area surrounding the right rear wheel consistent with the collision. I also observed a blonde, white female, identified via FL DL as Svetlana Kizilova, sitting in the driver seat of the Kia. It should be noted that driver of the Volkswagen had been transported to Delray Medical Center to assess her injuries prior to my arrival. There were no other subjects on scene. I conducted a crash investigation which was documented on HSMV crash report #27775264. Through investigation, I discovered that a 2021 gray Kia Sorento, bearing FL tag 65BTTI, was travelling southbound on N Military Trl. and attempting to make a left turn to travel eastbound on Banyan Trl. when it collided with a 2018 white Volkswagen Jetta, bearing FL tag BV82QU, that was heading northbound on N Military Trl. A witness, Aileen Grossmann, provided a sworn statement via telephone consistent with the manner of collision stated above. Grossmann advised that the Volkswagen had a green traffic signal and that the Kia failed to yield the right-of-way when turning left. Grossmann described the driver of the Kia as a white female with blonde hair, consistent with Kizilova`s appearance.

While conducting the traffic crash investigation I observed that Kizilova had glassy watery and blood shot eyes, slurred speech, and an overwhelmingly strong odor of an unknown alcoholic beverage emanating from her breath. I also observed that Kizilova had a fresh scratch on her right knee. When asked to provide her Driver`s License, Kizilova reached into the Kia and retrieved it from a wallet that was inside of a bag that was resting on the front passenger seat. Lastly, Kizilova had difficulty answering direct questions. An example of this was that Kizilova answered "green" when asked if her traffic signal was a green circle or a green arrow.

Based on my observations, I suspected that, at the time of the crash, Kizilova was

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

RAFALKO, TRAVIS
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/17/2026
DATE

S. Orozco
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

OROZCO, STEPHANIE MARIE (927)
NAME OF OFFICER (PLEASE PRINT)

04/17/2026
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

CONFIDENTIAL VICTIM INFORMATION PER MARSY'S LAW

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT SUPPLEMENT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2026-004077

Charge Type Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
KIZILOVA, SVETLANA ANATOLYEVNA		W	F	03/15/1983

PROBABLE CAUSE STATEMENT

operating a vehicle within the state while impaired by alcohol and/or chemical or controlled substances. After my crash investigation was completed, I informed Kizilova that crash investigation was over and that I was going to be conducting a DUI investigation. I then informed Kizilova of her constitutional warnings (Miranda). Kizilova confessed to being the driver of the gray Kia and being involved in the crash and advised she was the sole occupant of the vehicle. According to Kizilova, she consumed "two glasses of champagne" prior to the crash. Kizilova denied consuming any drugs today. According to Kizilova, she was not sick or injured, she did not have any physical defects or injuries, she did not limp, and she felt comfortable walking barefoot. Lastly, Kizilova stated she was not diabetic or epileptic and did not have anything wrong with her eyes that isn`t corrected by glasses or contacts. I then asked Kizilova to submit to Standardized Field Sobriety Exercises and she agreed to participate.

The first exercise was Horizontal Gaze Nystagmus. I administered the instructions and Kizilova stated that she understood. I first ensured that Kizilova`s eyes had equal pupil sizes and tracked equally. I then continued with the exercise. Kizilova displayed lack of smooth pursuit, distinct and sustained nystagmus at maximum deviation, and onset of nystagmus prior to 45 degrees in both eyes. Kizilova also displayed vertical nystagmus. During the exercise, I had to remind Kizilova not to move her head and to follow the stimulus with only her eyes. I also had to remind Kizilova to keep her eyes on the stimulus numerous times because she kept looking away. Lastly, I could smell a strong odor of an unknown alcoholic beverage emanating from her breath when she exhaled.

The second exercise was the Walk and Turn. I administered the instructions and demonstrated how the exercise should be completed. Kizilova stated that she understood. Kizilova failed to maintain the starting position during the instruction phase and kept moving around. During the exercise, Kizilova missed heel to toe on every step, stepped off the line, raised her arms and waved them around as if she was performing a choreographed dance, made an improper turn, and took an incorrect number of steps.

The third exercise was the One-Leg Stand. I administered the instructions and demonstrated how the exercise should be completed twice. Kizilova failed to maintain the starting position during the instruction phase and continued moving around. While administering the instructions, Kizilova began to do the Walk and Turn exercise again. Kizilova then stated that she understood the instructions. During the exercise Kizilova failed to follow the proper instructions, used her arms for balance, hopped to keep her balance, put her foot down several times, and began to move around as if she was performing a choreographed dance once again.

The fourth exercise was the Finger to Nose. I confirmed that Kizilova knew her left from her right by asking her to show me her left hand and then her right hand. I then

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SWORN AND SUBSCRIBED BEFORE ME

RAFALKO, TRAVIS
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/17/2026
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

OROZCO, STEPHANIE MARIE (927)
NAME OF OFFICER (PLEASE PRINT)

04/17/2026
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

CONFIDENTIAL VICTIM INFORMATION PER MARSY'S LAW

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2026-004077

Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
KIZILOVA, SVETLANA ANATOLYEVNA		W	F	03/15/1983

PROBABLE CAUSE STATEMENT

administered the instructions and Kizilova stated she understood. Kizilova failed to maintain the starting position during the instruction phase and continued moving around. The pattern was L-R-L-R-R-L.
L - Missed the tip of her nose and then repositioned her finger. Held her finger on her nose.
R - Held her finger on her nose.
L - Held her finger on her nose.
R - Held her finger on her nose.
R - Used her left hand to touch the tip of her nose. Held her finger on her nose.
L - Used her right hand to touch the tip of her nose. Held her finger on her nose.

The final exercise was the modified Romberg balance exercise. I administered the instructions and Kizilova stated she understood. Once again, Kizilova failed to maintain the starting position during the instruction phase and continued moving around. Kizilova estimated the passage of 30 seconds in 33 seconds.

Based on my investigation, and the totality of the circumstances, I found probable cause to believe that, at the time of the crash, Kizilova was operating a vehicle within the state while impaired by alcohol and/or chemical or controlled substances. Kizilova was placed under arrest for DUI per F.S.S. 316.193(3c1).

Kizilova was transported to BRPD booking for post arrest processing and the administration of a breath test. Officer Nava (ID897) (Breath Test Operator) responded to BRPD booking and assisted with the BAT room procedures. Kizilova was asked to provide a valid sample of her breath for the purpose of determining its alcohol content and ultimately provided two valid samples of .158 and .147. Kizilova was then informed of her constitutional warnings (Miranda) and requested an attorney at this time. See DUI Influence Report for further.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

RAFALKO, TRAVIS
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/17/2026
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

OROZCO, STEPHANIE MARIE (927)
NAME OF OFFICER (PLEASE PRINT)

04/17/2026
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

2026-004077
10-15 ; 1913 hrs
Observ. ; 1934 hrs

Svetlana A. Kizilova
FLDL: K-241-781-83-545-0
DOB: 03/15/1983

DUI INFLUENCE REPORT

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BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

Revised: July 9, 2018

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART I

On the _____ day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

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Horizontal Gaze Nystagmus:

☐ Left eye does not follow smoothly ☐ Right eye does not follow smoothly

☐ Left eye jerks at 45 degrees angle or less ☐ Right eye jerks at 45 degrees angle or less

☐ Distinct jerking left eye maximum deviation ☐ Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

_____

_____

_____

_____

_____

Can not do, Why? _____

One leg stand: _____

_____

_____

_____

_____

_____

Can not do, Why? _____

Finger to nose: _____

_____

_____

_____

_____

_____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____.

_____ _____

Notary/Clerk of Court/ Officer (FSS 117.10) Date

_____ _____

Signature of Arresting Officer Name of Officer (print)

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ARRESTING OFFICER: Orozco

Name: Casas Phone # _____ Work # _____

Address: BRPD

Can testify to: SFSTs

Name: Fisher Phone # _____ Work # _____

Address: BRPD

Can testify to: SFSTs

Name: Navc Phone # _____ Work # _____

Address: BRPD

Can testify to: Breath Test

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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-END OF PART ONE-

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2026-004077

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Friday (day), April (month), 17 (date), 2026 (year).

B. The time is now approximately 8:03 ~~AM~~/PM.

C. The following is in reference to case number 26-4077.

D. Present at this time is Ofc. Orozco & Ofc. Cases of the Boca Raton Police Department. (Officer's Name)

E. Officer Orozco, have you arrested Svetlana Kizilova (Defendant's name) in violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? Yes

G. Mr./Mrs./Ms. Kizilova, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

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II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

B. I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining the presence of chemical or controlled substances.

C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request. (Car camera)

I am _____ of the _____.

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. If you refuse to take the test I have requested of you, and if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for a refusal to submit to a lawful test of your breath, urine, or blood, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding

Subject Signature: _____

Note: Also read for CDL holders:

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. _____ has refused to submit to a breath test.

The date is _____ (month), _____ (day), _____ (year), and the time is _____AM/PM.

A refusal form will be completed by the arresting officer.

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BOCA RATON POLICE SERVICES DEPARTMENT

JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)

(2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)

(3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.*
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)

(4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means*
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)

(5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)

(6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)

(7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)

(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

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BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: Svetlana A. Kizilova

CASE #: 2026-00004077 DATE: 4/17/26

BREATH TEST RESULTS

1) TIME .158 @ 2122 AM/PM 2) TIME .147 @ 2127 AM/PM

3) TIME / AM/PM 4) TIME / AM/PM

BREATH OPERATOR: Nava

MAINTENANCE TECHNICIAN: Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: Loud, slurred

ATTITUDE: Argumentative

CLOTHING: White top, jean shorts

MEDICAL CONDITION: Good

OTHER:

COMMENTS: Test 1 - Volume Not Met
Test 2 - Control Not Met
Test 3 - No .020 Agreement
Test 4 - Control Not Met
Test 5 - .158 and .147

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Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning.
(4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning.
(5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
(6) I can make no threats or promises to induce you to make a statement. This must be of your own free will.
(7) Any statement can be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: (On Camera) Date: _____ Time: _____

QUESTIONS AND ANSWERS Refused

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____
_____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____AM/PM

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Refused

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain:

_____

Are you sick or injured? ☐ Yes ☐ No If yes, explain:

_____

Do you limp? ☐ Yes ☐ No Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately 9:32 ~~AM~~/PM.

The date is April (month), 17 (day), 2026 (year).

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FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 04/17/2026

Date of Last Agency Inspection: 04/16/2026
Observation Period Began: 19:34
Subject's Name: SVETLANA A KIZILOVA DOB: 03/15/1983 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	20:11
Air Blank	0.000	20:11
Control Test	0.076	20:12
Air Blank	0.000	20:12
Subject Sample #1	VNM*	20:15
Air Blank	0.000	20:16
Air Blank	0.000	20:18
Subject Sample #2	VNM**	20:21
Air Blank	0.000	20:22
Control Test	0.075	20:22
Air Blank	0.000	20:23
Diagnostics Check	OK	20:23

*Volume Not Met (0.158 - Breath Sample Not Reliable to Determine Breath Alcohol Level)
**Volume Not Met (0.131 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 08425080A2
Exp: 05/05/2027

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I TIMO J NAVA, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 4/17/26
Signature

Sworn to (or affirmed) before me this 17th day of April, 2026

_____ _____
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
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Subject's Name: SVETLANA A KIZILOVA DOB: 03/15/1983 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	20:27
Air Blank	0.000	20:27
Control Test	0.074*	20:27
Air Blank	0.000	20:28

*Control Outside Tolerance

Cylinder Lot: 08425080A2
Exp: 05/05/2027

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I TIMO J NAVA, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 4/17/26
Signature

Sworn to (or affirmed) before me this 17th day of April, 2026

S. Orozco S. Orozco
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

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Date of Test: 04/17/2026

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Observation Period Began: 20:34
Subject's Name: SVETLANA A KIZILOVA DOB: 03/15/1983 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	20:56
Air Blank	0.000	20:56
Control Test	0.075	20:56
Air Blank	0.000	20:57
Subject Sample #1	VNM*	21:00
Air Blank	0.000	21:01
Air Blank	0.000	21:03
Subject Sample #2	0.143**	21:03
Air Blank	0.000	21:04
Air Blank	0.000	21:06
Subject Sample #3	0.166**	21:08
Air Blank	0.000	21:09
Control Test	0.075	21:09
Air Blank	0.000	21:10
Diagnostics Check	OK	21:10

*Volume Not Met (0.135 - Breath Sample Not Reliable to Determine Breath Alcohol Level)
**No .020 agreement

Cylinder Lot: 08425080A2
Exp: 05/05/2027

State of Florida, County of Palm Beach.

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I TIMO J NAVA, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 4/17/26
Signature

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S. Demayo S. Orozco
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

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The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	21:13
Air Blank	0.000	21:13
Control Test	0.073*	21:13
Air Blank	0.000	21:14

*Control Outside Tolerance

Cylinder Lot: 08425080A2
Exp: 05/05/2027

State of Florida, County of Palm Beach,

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The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	21:20
Air Blank	0.000	21:21
Control Test	0.075	21:21
Air Blank	0.000	21:21
Subject Sample #1	0.158	21:22
Air Blank	0.000	21:23
Air Blank	0.000	21:25
Subject Sample #2	0.147	21:27
Air Blank	0.000	21:27
Control Test	0.075	21:28
Air Blank	0.000	21:28
Diagnostics Check	OK	21:28

Cylinder Lot: 08425080A2
Exp: 05/05/2027

State of Florida, County of Palm Beach,

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐	817.568	Criminal use of personal identification information. (INMATE PIN NUMBERS)	
	☐	415.107 (1)	ELDERLY NEGLECT ABUSE	

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REVIEW COMPLETED BY

Booking Number: 2026010135	**Date:** 4/18/2026
	Specialist Name/ID#: MTooks #8557